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<b>UTILITY PATENT APPLICATION TRANSMITTAL</b> <i>(Only for new nonprovisional applications under 37 CFR 1.53(b))</i>	Attorney Docket No.	7732-020-27 DIV
	First Inventor or Application Identifier	MICHAEL CLIMO, ET AL.
	Title	COMPOSITIONS AND METHODS FOR TREATMENT OF STAPHYLOCOCCAL INFECTION WHILE SUPPRESSING FORMATION OF ANTIBIOTIC-RESISTANT STRAINS

<b>APPLICATION ELEMENTS</b> <i>See MPEP chapter 600 concerning utility patent application contents</i>	<b>ADDRESS TO:</b> Assistant Commissioner for Patents Box Patent Application Washington, DC 20231
1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g. PTO/SB/17) (Submit an original and a duplicate for fee processing)  2. <input checked="" type="checkbox"/> Specification <span style="float: right;">Total Pages <b>15</b></span>  3. <input type="checkbox"/> Drawing(s) (35 U.S.C. 113) <span style="float: right;">Total Sheets <span style="border: 1px solid black; padding: 2px 10px;"></span></span>  4. <input checked="" type="checkbox"/> Oath or Declaration <span style="float: right;">Total Pages <b>3</b></span> a. <input type="checkbox"/> Newly executed (original or copy) b. <input checked="" type="checkbox"/> Copy from a prior application (37 C.F.R. §1.63(d)) (for continuation/divisional with box 15 completed) i. <input type="checkbox"/> <b>DELETION OF INVENTOR(S)</b> Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §1.63(d)(2) and 1.33(b).  5. <input checked="" type="checkbox"/> Incorporation By Reference (usable if box 4B is checked) The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4B, is considered to be part of the disclosure of the accompanying application and is hereby incorporated by reference therein.	<b>ACCOMPANYING APPLICATION PARTS</b>  6. <input type="checkbox"/> Assignment Papers (cover sheet & document(s)) 7. <input type="checkbox"/> 37 C.F.R. §3.73(b) Statement <input type="checkbox"/> Power of Attorney (when there is an assignee) 8. <input type="checkbox"/> English Translation Document (if applicable) 9. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations 10. <input checked="" type="checkbox"/> Preliminary Amendment 11. <input checked="" type="checkbox"/> White Advance Serial No. Postcard  12. <input type="checkbox"/> Small Entity Statement(s) <input checked="" type="checkbox"/> Statement filed in prior application. Status still proper and desired. 13. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed) 14. <input type="checkbox"/> Other:
15. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below: <input type="checkbox"/> Continuation <input checked="" type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application no.: 09/263,776, Filed MARCH 5, 1999 Prior application information: Examiner: BORIN, M. <span style="float: right;">Group Art Unit: 1631</span>	
16. Amend the specification by inserting before the first line the sentence: <input checked="" type="checkbox"/> This application is a <input type="checkbox"/> Continuation <input checked="" type="checkbox"/> Division <input type="checkbox"/> Continuation-in-part (CIP) of application Serial No. 09/263,776 Filed on MARCH 5, 1999  <input type="checkbox"/> This application claims priority of provisional application Serial No. Filed	
<b>17. CORRESPONDENCE ADDRESS</b> Steven B. Kelber PIPER MARBURY RUDNICK & WOLFE LLP 1200 Nineteenth Street, N.W. Washington, D.C. 20036-2412 Telephone No. (202) 861-3900 Facsimile No. (202) 223-2085	

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Docket No. 7732-020-27 DIV

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

INVENTOR(S) MICHAEL CLIMO, ET AL.

SERIAL NO: NEW DIVISIONAL APPLICATION

FILING DATE: HEREWITH

FOR: COMPOSITIONS AND METHODS FOR TREATMENT OF STAPHYLOCOCCAL INFECTION WHILE SUPPRESSING FORMATION OF ANTIBIOTIC-RESISTANT STRAINS

FEE TRANSMITTAL

ASSISTANT COMMISSIONER FOR PATENTS  
WASHINGTON, D.C. 20231

FOR	NUMBER FILED	NUMBER EXTRA	RATE	CALCULATIONS
TOTAL CLAIMS	16 - 20 =	0	× \$18 =	\$0.00
INDEPENDENT CLAIMS	2 - 3 =	0	× \$78 =	\$0.00
<input type="checkbox"/> MULTIPLE DEPENDENT CLAIMS (If applicable)			+ \$260 =	\$0.00
<input type="checkbox"/> LATE FILING OF DECLARATION			+ \$130 =	\$0.00
BASIC FEE				\$690.00
TOTAL OF ABOVE CALCULATIONS				\$690.00
<input checked="" type="checkbox"/> REDUCTION BY 50% FOR FILING BY SMALL ENTITY				\$345.00
<input type="checkbox"/> FILING IN NON-ENGLISH LANGUAGE			+ \$130 =	\$0.00
<input type="checkbox"/> RECORDATION OF ASSIGNMENT			+ \$40 =	\$0.00
TOTAL				\$345.00

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The Commissioner is hereby authorized to charge any additional fees which may be required for the papers being filed herewith and for which no check is enclosed herewith, or credit any overpayment to Deposit Account No. 50-1442. A duplicate copy of this sheet is enclosed.

Respectfully submitted,

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